Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I (Column 1)						(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS			30				ſ	RATE	FEE		RATE	FEE
FOR NL				JMBER FILED		NUMBER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS 2			2 Omin	3 Ominus 20=		10		X\$ 9=		OR	X\$18=	180
INDEPENDENT CLAIMS			3 minus 3 =		* .		Ì	X42=		OR	X84=	_
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	1
* If the difference in column 1 is less than zero, ente					r "0" in c	olumn 2		TOTAL		OR	TOTAL	930
CLAIMS AS AMENDED - PART I (Column 1) (Column						(Column 3)		SMALL	NTITY	OR	OTHER SMALL	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT A	Total	*	Minus	**		=		X\$ 9=	,	OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM			+140=		OR	+280=	
								TOTAL	<u> </u>		TOTAL ADDIT. FEE	
ADDIT. FEE OTT ADDIT. FEE (Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIG NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	IT OL A 11			X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]	+140=		OR	+280=	E
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NU: PREV	HEST MBER NOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***	·	=		X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDEN					A	j	+140=		OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
*	**If the "Highest No.	umber Previously	Paid For" IN Th	dis spaci	E is less ti	nan 3, enter "3." ne biobest numb	er fo			ox in c	olumn 1.	